

The Department of Human Services in Partnership with
the Departments of Economic Development, Education,
Human Rights, Management, and Workforce Development.

Participant Name	Social Security Number

Date: October 29, 2009

FAMILY INVESTMENT AGREEMENT

The purpose of this agreement is to outline the family plan to achieve self-sufficiency by identifying the resources and supportive services to be provided to the family and the activities to be completed by the family in order to reach the final goal.

FAMILY GOAL: Achieve self-sufficiency through full-time employment.

This family plans to achieve self-sufficiency and leave the family investment program by July 25, 2010. Self-sufficiency means that this family will no longer receive cash assistance through the family investment program.

PARTICIPANT AGREEME	GREEMENT PROMISE JOBS AGREEMENT				
I acknowledge by my signature that I have reviewed, understand and received a copy of this Family Investment Agreement (FIA). I agree to fulfill the requirements as outlined in the Needs and Interim Goals and Action Steps section of the FIA. I agree that if I abandon this FIA, I will be placed on the Limited Benefit Plan. I understand that in certain situations, this agreement can be modified. If I disagree with my PROMISE JOBS worker about the contents of the Family Investment Agreement, I understand that I can ask to talk with a supervisor and ask for a decision from the supervisor in writing about our dispute. I further understand that, if this informal resolution process doesn't resolve my disagreement with the PROMISE JOBS worker, I have the right to appeal the content of the FIA. See back for appeal rights.		PROMISE JOBS will provide the support services and funding we agree are necessary to help you achieve self-sufficiency. Transportation funding is not available for paid employment. If your application for FIP is denied or when you go of FIP, you are not eligible for PROMISE JOBS services.			
Participant Signature	Date	PROMISE JOBS Worker Signature	Date		
Participant Signature	Date	PROMISE JOBS Supervisor Signature	Date		

You Have the Right to Appeal

What is an appeal?

An appeal is when you ask for a hearing because you do not like a decision made by the Department of Human Services (DHS). You have the right to file an appeal if you disagree with the decision. You do not have to pay to file an appeal. 441 Iowa Administrative Code Chapter 7.

How do I appeal?

It is easy to file an appeal. You must appeal in writing for all programs, except for food assistance. You can appeal verbally for food assistance. To appeal in writing:

- Complete an appeal electronically at www.dhs.state.ia.us/appeals.asp,
- Write a letter telling us why you think the decision is wrong, or
- Fill out an Appeal and Request for Hearing form.

Send or take your appeal to the Department of Human Services, Appeals Section, 5th Floor, 1305 E Walnut Street, Des Moines, Iowa 50319-0114. Your county DHS office will help you file an appeal if you ask them.

How long do I have to appeal?

For Food Assistance, you have 90 calendar days to file an appeal. For all other programs, you must file an appeal within:

- 30 calendar days from the date of this decision, or
- Before the date this decision goes into effect.

If you file an appeal more than 30 days, but less than 90 calendar days, you must tell us why the appeal was filed late. If you have a good reason for filing your appeal late, we will decide if you can get a hearing.

We are not able to give you a hearing if you filed your appeal 90 calendar days after the date of the decision.

Can I continue to get benefits when my appeal is pending?

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Can I have someone else help me in the hearing?

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Statement of Nondiscrimination

By law, DHS will not discriminate against you on the following basis:

Age

- Color
- Creed
- Disability
- National Origin

- Political Beliefs
- Race
- Religion
- Sex

If you feel we have discriminated, you can ask for a Discrimination Complaint form from any DHS office or the DHS Diversity Program Unit. To file a complaint of discrimination, you may also write to any of the addresses below. If you need help, you may call your county DHS office.

Iowa Department of Human Services

Diversity Program Unit 1st Fl

1305 E Walnut

Des Moines IA 50319-0114

Iowa Civil Rights Commission

400 E 14th St

Des Moines IA 50319-1004

U.S. Department of Health and Human Services

Office for Civil Rights Region VII 601 E 12 St Rm 248

Kansas City MO 64106-2808



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Participant Name		
SSN		
Date		
IM Worker No.	County No.	

FIA STEPS TO ACHIEVE SELF-SUFFICIENCY

Individual Goal: Achieve self sufficiency by obtaining GED followed by full time employment

		Time Frames			
NEEDS TO BE RESOLVED TO	INTERIM GOALS AND	Targeted Date		Actua	ll Date
ACHIEVE SELF-SUFFICIENCY	ACTION STEPS	Start	End	Start	End
Child Care	Arrange for approvable child care of your choosing. If needed, contact the Childcare Resource and Referral Center of Central Iowa for assistance at 725-2600 or (800) 722-7619. Notify your worker once you have chosen a provider.	10/29/09	11/18/09		
Parenting Skills	Attend parenting skills class November 19, 2009 at the Young Women's Resource Center located at 705 E 2 nd Ave. Des Moines, IA 50309. Class is 9 am to 3 pm.	11/19/09	11/19/09		
Obtain GED	Attend DMACC 30 hours per week. Submit attendance reports to PROMISE JOBS by the 10 th of each month. First time and attendance is due no later than 12/10/09	11/23/09	2/23/10		21. 1
Seek full time employment.	Participate in 30 hours of verifiable individual job search activities. Submit job search logs each Friday to PROMISE JOBS. Notify PROMISE JOBS within 10 days of obtaining employment.	2/24/10	4/24/10		
Maintain full time employment to self-sufficiency.	Monitor employment. Provide employment verification specifying actual hours worked and start date within 30 days of hire. Provide additional employment verification as requested by PROMISE JOBS. Notify PROMISE JOBS within 5 days of any change in employment.	4/25/10	7/25/10		, , f .

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470-3096 (Rev. 11/04)

Copy 1 - Case Record

Copy 2 – Participant

Copy 3 - DHS

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Family planning information and referral: Note: I understand that acceptance of family planning mind.					f I change	
If your application for FIP is denied or when y	ou go off FIP	, you are	not eligible for PRC	OMISE JOBS service	s.	
Assistance and support services available as need	ed from PROM	IISE JOB	S (not all services are	available for each com	ponent):	
☐ Transportation Parenting, GED and Job Sear	rch		Tuition, books, fees			_
☐ Child care Parenting, GED and Job Search			Tools, uniforms			-
Family development services		□	Other			-
				•		
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